

**PART B - FEE(S) TRANSMITTAL**

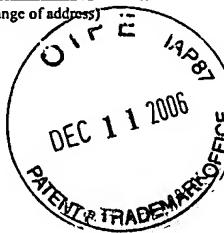
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00140 7590 09/07/2006

**LADAS & PARRY**  
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<b>CLIFFORD J. MASS</b>	(Depositor's name)
<i>CLIFFORD J. MASS</i>	(Signature)
<i>DEC. 7, 2006</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/675,866	09/30/2003	Hajime Mizutani	U 014835-3	1875

**TITLE OF INVENTION: TRANSFERRING PRESSURE ROLL, TRANSFERRING UNIT AND INK JET RECORDING APPARATUS**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/07/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
LIANG, LEONARD S	2853	347-101000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list <input type="checkbox"/> 1 <u>14P81</u> <u>14P81</u> <input type="checkbox"/> 2 <u>CLIFFORD J. MASS</u> <u>CLIFFORD J. MASS</u> <input type="checkbox"/> 3 <u>LIANG, LEONARD S</u> <u>LIANG, LEONARD S</u> <input type="checkbox"/> 4 <u>26 WEST 61ST STREET</u> <u>26 WEST 61ST STREET</u> <input type="checkbox"/> 5 <u>NEW YORK, NY 10023</u> <u>NEW YORK, NY 10023</u>
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**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

**(A) NAME OF ASSIGNEE**

SEIKO EPSON CORPORATION

**(B) RESIDENCE: (CITY and STATE OR COUNTRY)** TOKYO, JAPAN

RECORDATION DATE: JULY 1, 2004

REEL/FRAME NO.: 015533/0141

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

**4a. The following fee(s) are submitted:**

Issue Fee  
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number \_\_\_\_\_ (enclose an extra copy of this form).

**5. Change in Entity Status (from status indicated above)**

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date \_\_\_\_\_

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CLIFFORD J. MASS

Registration No. \_\_\_\_\_

30,086

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